

PTO/SB/22 (06-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 10892-00018-US															
<p>In re Application of Michel A. Crepeau</p> <table border="1"> <tr> <td>Application Number 09/921,947-Conf. #8375</td> <td>Filed August 3, 2001</td> </tr> <tr> <td>For: NON-COMBUSTIBLE WATER-DISPERSIBLE VITAMIN COMPOSITIONS</td> <td></td> </tr> <tr> <td>Art Unit 1617</td> <td>Examiner L. Wells</td> </tr> </table>			Application Number 09/921,947-Conf. #8375	Filed August 3, 2001	For: NON-COMBUSTIBLE WATER-DISPERSIBLE VITAMIN COMPOSITIONS		Art Unit 1617	Examiner L. Wells									
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Art Unit 1617	Examiner L. Wells																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$ 1,480.00</td></tr> <tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-2775</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,707</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p><u>October 31, 2003</u>  <u>Date</u> Signature <u>(302) 658-9141</u> William E. McShane <u>Telephone Number</u> Typed or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____	<input checked="" type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ 1,480.00	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____
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